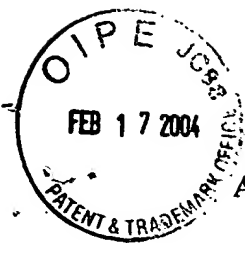


#4



**GENERAL POWER OF ATTORNEY BY ASSIGNEE
AND EXCLUSION OF INVENTORS UNDER 37 C.F.R. 3.71**

The undersigned Assignee hereby designates the following as its correspondence address and telephone number:

John V. Biernacki
Jones, Day, Reavis & Pogue
North Point
901 Lakeside Avenue
Cleveland, Ohio 44114
(216) 586-3939

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and appoints the following as its attorneys with full power of substitution and revocation, to prosecute all patent applications for which the undersigned Assignee is or will become an assignee of record, and to transact all related business in the Patent and Trademark Office:

Kenneth R. Adamo, Registration No. 27,299; Barbara E. Arndt, Registration No. 37,768; John V. Biernacki, Registration No. 40,511; David B. Cochran, Registration No. 39,142; Lorri W. Cooper, Registration No. 40,038; Regan J. Fay, Registration No. 26,878; F. Drexel Feeling, Registration No. 40,602; Paul E. Franz, Registration No. 45,910; Calvin P. Griffith, Registration No. 34,831; David M. Maiorana, Registration No. 41,449; Timothy J. O'Hearn, Registration No. 31,552; Mitchell Rose, Registration No. 47,906; Joseph M. Sauer, Registration No. 47,919; Stephen D. Scanlon, Registration No. 32,755; Jenny L. Sheaffer, Registration No. 45,099; H. Duane Switzer, Registration No. 22,431; Michael W. Vary, Registration No. 30,811; and James L. Wamsley, III, Registration No. 31,578;

all having the above designated address, provided that, if any appointed attorney ceases to be affiliated with the law firm of Jones, Day, Reavis & Pogue, then the appointment of such attorney and all powers derived therefrom shall terminate on the date such attorney ceases to be so affiliated.

In accordance with 37 C.F.R. 3.71, this appointment is to the exclusion of the inventors and their attorneys.

An assignment of the entire interest in application no. 09/759,926 :

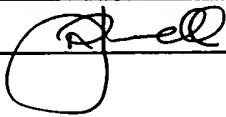
☒ was recorded on March 21, 2001 at reel/frame 011645 / 0019 .

☐ is submitted herewith for recording.

Please direct all correspondence for this application to customer no. 501432.

ASSIGNEE: VoiceGenie Technologies Inc.

Signature: _____



Typed Name: _____

RONALD JEWELL

Position/Title: _____

VP, FINANCE & ADMINISTRATION

Address: _____

1120 Finch Avenue West

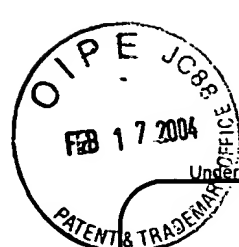
8th Floor

Toronto, Ontario M3J 3H7

CANADA

Date: _____

21.06.02



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PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	09/759,926
Filing Date	January 12, 2001
First Named Inventor	Stuart Berkowitz et al.
Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	668437600003

Total Number of Pages in This Submission

3

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John V. Biernacki Jones Day
Signature	
Date	February 12, 2004

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Kathie J. Kopczyk		
Signature		Date	February 12, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.